

Joky LLC

Questions? Call 916-995-1115

RENTAL APPLICATION

FAX TO: Dhar Sandhu @ 352-274-9136

Each adult (18 or older) must fill out a separate application.

Last	First	M.I.	Birth Date	Driver's License #
Social Security #	Home Phone	Work Phone	Cell Phone	
Names you have used in the past		Email Address		
All Other Proposed Occupants		Birth Date	Relationship to Applicant	

RENTAL/RESIDENCE HISTORY:

	Current Residence	Previous Residence	Prior Residence
Street Address			
City, State, Zip			
Rent per Month Paid			
Owner/Manager			
Phone Number			
Reason for Leaving			
Is/Was rent paid in full?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Did you give notice?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
How much notice?			
Were you asked to move?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Name(s) in which your utilities are now billed			
	From/To	From/To	From/To
Dates of Residency			

EMPLOYMENT HISTORY:

	Current Employment	Previous Employment	Prior Employment
Employer name			
Street Address			
City, State, Zip			
Name of Supervisor			
Phone Number			
Monthly Gross Pay			
	From/To	From/To	From/To
Dates of Employment			

CREDIT HISTORY:

	Bank/Institution Name	Balance on Deposit or Balance Owed
Savings Account		
Checking Account		
Credit Card		
Auto Loan		
Any other verifiable income (optional)	Amount: \$ _____ Frequency: _____ Source: _____	

VEHICLES: (Include vehicles belonging to other proposed occupants also)

Make	Model	Color	Year	License Plate #

REFERENCES & EMERGENCY CONTACTS:

	Doctor	Lawyer	Nearest Relative Living Elsewhere
Name			
Street Address			
City, State, Zip			
Phone Number			

By signing the application you grant us permission to communicate with all the contacts listed in this section in the event we cannot locate you.

Furthermore, if you abandon the apartment for any reason then you grant us permission to allow your relative listed above to remove all contents of the dwelling on your behalf.

GENERAL INFORMATION:

Have you ever been served a late rent notice? ☐ Yes ☐ No Do you or any of the proposed occupants smoke? ☐ Yes ☐ No
Have you ever been served an eviction notice? ☐ Yes ☐ No How long do you plan to rent from us? _____
If so, when? _____ When would you be able to move in? _____
Have you ever filed for bankruptcy? ☐ Yes ☐ No Have you ever been convicted of a felony? ☐ Yes ☐ No
If so, when? _____ How did you hear about this apartment? _____
Have you been a party to a lawsuit in the past? ☐ Yes ☐ No
If yes, please explain why: _____
Have you had any recurring problems with your current apartment and/or landlord? If yes, please explain: _____

Why are you moving from your current address? _____
We run both a credit check and criminal background check on all applicants. Is there anything negative we will find? ☐ Yes ☐ No
Negative credit check? ☐ Yes ☐ No Negative criminal background check? ☐ Yes ☐ No
If yes, please explain: _____

If you were to run into financial difficulty in the future and could not pay rent, would you be able to borrow money? ☐ Yes ☐ No
If so, provide that person's contact information below:

Name	Street Address	City, State, Zip	Phone Number

Do you know of anybody else looking for an apartment? If so, please provide their contact information below. (NOTE: A \$25.00 referral fee will be given once person completes 3-month rental.)

PETS:

	Pet #1	Pet #2	Deposit / Regulations
Name			Non-refundable pet deposit of \$150.00 per pet is required. (Note: Deposit subject to discount on 2 nd pet if applicant qualifies.)
Breed			
Color			
Weight			All pets must wear tags with name and owner's address. All pets must wear tags showing all vaccinations are current.
Age			

AGREEMENT & AUTHORIZATION SIGNATURE

The statements made above are true and correct. I hereby authorize a credit and/or criminal background check to be made along with verification of any and all information provided and communication with any and all names listed on this application. I understand that any discrepancy or lack of information may result in the rejection of this application. This is an application for an apartment and does not constitute a rental or lease agreement in whole or in part.

Applicant Name (please print)

Date

Applicant Signature